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NEWS	1		Web Page for STN Seminar Schedule - N. America
NEWS	2	DEC 01	ChemPort single article sales feature unavailable
NEWS	3	APR 03	CAS coverage of exemplified prophetic substances enhanced
NEWS	4	APR 07	STN is raising the limits on saved answers
NEWS	5	APR 24	CA/CAPLUS now has more comprehensive patent assignee information
NEWS	6	APR 26	USPATFULL and USPAT2 enhanced with patent assignment/reassignment information
NEWS	7	APR 28	CAS patent authority coverage expanded
NEWS	8	APR 28	ENCOMPLIT/ENCOMPLIT2 search fields enhanced
NEWS	9	APR 28	Limits doubled for structure searching in CAS REGISTRY
NEWS	10	MAY 08	STN Express, Version 8.4, now available
NEWS	11	MAY 11	STN on the Web enhanced
NEWS	12	MAY 11	BEILSTEIN substance information now available on STN Easy
NEWS	13	MAY 14	DGENE, PCTGEN and USGENE enhanced with increased limits for exact sequence match searches and introduction of free HIT display format
NEWS	14	MAY 15	INPADOCDB and INPAFAMDB enhanced with Chinese legal status data
NEWS	15	MAY 28	CAS databases on STN enhanced with NANO super role in records back to 1992
NEWS	16	JUN 01	CAS REGISTRY Source of Registration (SR) searching enhanced on STN
NEWS	17	JUN 26	NUTRACEUT and PHARMAML no longer updated
NEWS	18	JUN 29	IMSCOPROFILE now reloaded monthly
NEWS	19	JUN 29	EPFULL adds Simultaneous Left and Right Truncation (SLART) to AB, MCLM, and TI fields
NEWS	20	JUL 09	PATDPAFULL adds Simultaneous Left and Right Truncation (SLART) to AB, CLM, MCLM, and TI fields
NEWS	21	JUL 14	USGENE enhances coverage of patent sequence location (PSL) data
NEWS	22	JUL 27	CA/CAPLUS enhanced with new citing references
NEWS	23	JUL 16	GBFULL adds patent backfile data to 1855
NEWS	24	JUL 21	USGENE adds bibliographic and sequence information
NEWS	25	JUL 28	EPFULL adds first-page images and applicant-cited references
NEWS	26	JUL 28	INPADOCDB and INPAFAMDB add Russian legal status data

NEWS EXPRESS MAY 26 09 CURRENT WINDOWS VERSION IS V8.4,  
AND CURRENT DISCOVER FILE IS DATED 06 APRIL 2009.

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FILE 'HOME' ENTERED AT 15:01:37 ON 29 JUL 2009

=> file registry

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	0.22	0.22

FILE 'REGISTRY' ENTERED AT 15:01:48 ON 29 JUL 2009

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DICTIONARY FILE UPDATES: 28 JUL 2009 HIGHEST RN 1169929-67-2

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<http://www.cas.org/support/stngen/stndoc/properties.html>

=> s mitemcinal/cn

L1 1 MITEMCINAL/CN

=> d l1

L1 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2009 ACS on STN

RN 154738-42-8 REGISTRY

ED Entered STN: 03 May 1994

CN Erythromycin, 8,9-didehydro-N-demethyl-9-deoxo-6,11-dideoxy-6,9-epoxy-12-O-methyl-N-(1-methylethyl)-11-oxo- (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN 6,15-Dioxabicyclo[10.2.1]pentadecane, erythromycin deriv.

OTHER NAMES:

CN Mitemcinal

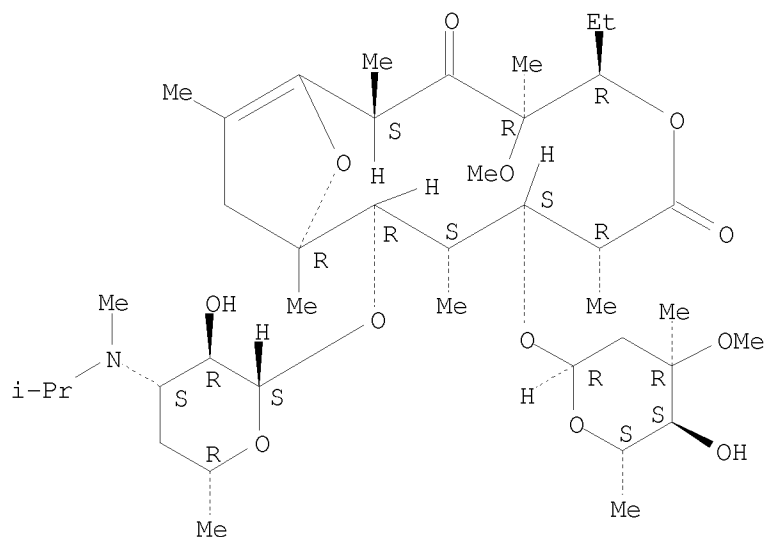
FS STEREOSEARCH

MF C40 H69 N O12

CI COM

SR CA  
 LC STN Files: ADISINSIGHT, CA, CAPLUS, CASREACT, CHEMCATS, EMBASE,  
 IMSRESEARCH, IPA, PROMT, PROUSDDR, RTECS\*, SYNTHLINE, TOXCENTER, USAN,  
 USPAT2, USPATFULL  
 (\*File contains numerically searchable property data)

Absolute stereochemistry.



\*\*PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT\*\*

22 REFERENCES IN FILE CA (1907 TO DATE)  
 22 REFERENCES IN FILE CAPLUS (1907 TO DATE)

=> file caplus  
 COST IN U.S. DOLLARS  
 FULL ESTIMATED COST

SINCE FILE	TOTAL
ENTRY	SESSION
7.88	8.10

FILE 'CAPLUS' ENTERED AT 15:02:08 ON 29 JUL 2009  
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FILE COVERS 1907 - 29 Jul 2009 VOL 151 ISS 5  
 FILE LAST UPDATED: 28 Jul 2009 (20090728/ED)  
 REVISED CLASS FIELDS (/NCL) LAST RELOADED: Jun 2009

USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Jun 2009

CAPLUS now includes complete International Patent Classification (IPC) reclassification data for the second quarter of 2009.

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<http://www.cas.org/legal/infopolicy.html>

This file contains CAS Registry Numbers for easy and accurate substance identification.

The ALL, BIB, MAX, and STD display formats in the CA/CAPLUS family of databases have been updated to include new citing references information. This enhancement may impact record import into database management software. For additional information, refer to NEWS 22.

=> s l1

L2 22 L1

=> s l2 and (constipation or dyschezia)

5461 CONSTIPATION

8 DYSCHYZIA

L3 1 L2 AND (CONSTIPATION OR DYSCHYZIA)

=> d l3

L3 ANSWER 1 OF 1 CAPLUS COPYRIGHT 2009 ACS on STN

AN 2007:1179963 CAPLUS

DN 149:323647

TI Mitemcinal (GM-611), an orally active motilin agonist, facilitates defecation in rabbits and dogs without causing loose stools

AU Sudo, H.; Ozaki, K.; Muramatsu, H.; Kamei, K.; Yogo, K.; Cynshi, O.; Koga, H.; Itoh, Z.; Omura, S.; Takanashi, H.

CS Fuji-Gotemba Research Laboratories, Chugai Pharmaceutical Co., Ltd., Gotemba, Shizuoka, Japan

SO Neurogastroenterology & Motility (2007), 19(4), 318-326

CODEN: NMOTEK; ISSN: 1350-1925

PB Blackwell Publishing Ltd.

DT Journal

LA English

OSC.G 4 THERE ARE 4 CAPLUS RECORDS THAT CITE THIS RECORD (4 CITINGS)

RE.CNT 40 THERE ARE 40 CITED REFERENCES AVAILABLE FOR THIS RECORD

ALL CITATIONS AVAILABLE IN THE RE FORMAT

=> file embase biosis medline

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SINCE FILE

TOTAL

ENTRY

SESSION

FULL ESTIMATED COST

6.73

14.83

FILE 'EMBASE' ENTERED AT 15:03:14 ON 29 JUL 2009

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FILE 'BIOSIS' ENTERED AT 15:03:14 ON 29 JUL 2009

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FILE 'MEDLINE' ENTERED AT 15:03:14 ON 29 JUL 2009

=> s l1<chem>

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COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	3.21	18.04

FILE 'REGISTRY' ENTERED AT 15:03:20 ON 29 JUL 2009  
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SEL L1 1- CHEM  
L4 SEL L1 1- CHEM : 2 TERMS

SET SMARTSELECT OFF  
SET COMMAND COMPLETED

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	15.08	33.12

FILE 'EMBASE' ENTERED AT 15:03:21 ON 29 JUL 2009  
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FILE 'BIOSIS' ENTERED AT 15:03:21 ON 29 JUL 2009  
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FILE 'MEDLINE' ENTERED AT 15:03:21 ON 29 JUL 2009

S L4  
L5 114 L4

=> s 15 and (constipation or dyschezia)  
L6 13 L5 AND (CONSTIPATION OR DYSCHYZIA)

=> dup rem 16  
PROCESSING COMPLETED FOR L6  
L7 12 DUP REM L6 (1 DUPLICATE REMOVED)

=> d 17 1-12 ibib abs

L7 ANSWER 1 OF 12 EMBASE COPYRIGHT (c) 2009 Elsevier B.V. All rights reserved on STN  
ACCESSION NUMBER: 2009054854 EMBASE  
TITLE: Gastroparesis: Current diagnostic challenges and management considerations.  
AUTHOR: Waseem, Shamaila  
CORPORATE SOURCE: Department of Pediatric Gastroenterology Hepatology and Nutrition, University of Florida, 1600 SW Archer Rd., Gainesville, FL 32610, United States.  
AUTHOR: Moshiree, Baharak; Draganov, Peter V., Dr. (correspondence)  
CORPORATE SOURCE: Department of Gastroenterology Hepatology and Nutrition, University of Florida, 600 SW Archer Rd., Gainesville, FL 32610, United States. dragapv@medicine.ufl.edu  
SOURCE: World Journal of Gastroenterology, (7 Jan 2009) Vol. 15,

No. 1, pp. 25-37.

Refs: 130

ISSN: 1007-9327 CODEN: WJGAF2

PUBLISHER: WJG Press, P.O. Box 2345, Beijing, 100023, China.

COUNTRY: China

DOCUMENT TYPE: Journal; General Review; (Review)

FILE SEGMENT: 030 Clinical and Experimental Pharmacology

037 Drug Literature Index

038 Adverse Reactions Titles

048 Gastroenterology

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 20 Feb 2009

Last Updated on STN: 20 Feb 2009

AB Gastroparesis refers to abnormal gastric motility characterized by delayed gastric emptying in the absence of mechanical obstruction. The most common etiologies include diabetes, post-surgical and idiopathic. The most common symptoms are nausea, vomiting and epigastric pain. Gastroparesis is estimated to affect 4% of the population and symptomatology may range from little effect on daily activity to severe disability and frequent hospitalizations. The gold standard of diagnosis is solid meal gastric scintigraphy. Treatment is multimodal and includes dietary modification, prokinetic and anti-emetic medications, and surgical interventions. New advances in drug therapy, and gastric electrical stimulation techniques have been introduced and might provide new hope to patients with refractory gastroparesis. In this comprehensive review, we discuss gastroparesis with emphasis on the latest developments; from the perspective of the practicing clinician. .COPYRG. 2009 The WJG Press and Baishideng. All rights reserved.

L7 ANSWER 2 OF 12 EMBASE COPYRIGHT (c) 2009 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2008526761 EMBASE

TITLE: Prokinetics and fundic relaxants in upper functional GI disorders.

AUTHOR: Tack, Jan (correspondence)

CORPORATE SOURCE: Center for Gastroenterological Research, K.U. Leuven, Belgium. Jan.Tack@med.kuleuven.ac.be

SOURCE: Current Opinion in Pharmacology, (December 2008) Vol. 8, No. 6, pp. 690-696.

Refs: 73

ISSN: 1471-4892 CODEN: COPUBK

PUBLISHER: Elsevier Ltd, Langford Lane, Kidlington, Oxford, OX5 1GB, United Kingdom.

PUBLISHER IDENT.: S 1471-4892(08)00157-4

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review; (Review)

FILE SEGMENT: 030 Clinical and Experimental Pharmacology

037 Drug Literature Index

038 Adverse Reactions Titles

048 Gastroenterology

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 5 Dec 2008

Last Updated on STN: 5 Dec 2008

AB Gastrointestinal prokinetics are a heterogeneous class of drugs that stimulate smooth muscle contractions to enhance gastric emptying and intestinal transit. Recently studied prokinetics include antidopaminergic agents (itopride), serotonergic agents (tegaserod and others), and motilin receptor agonists and ghrelin receptor agonists (mitemcinal, TZP101). It has been difficult to establish symptomatic benefit with prokinetic drugs in gastroparesis and functional dyspepsia, because of

pathophysiological heterogeneity of the patient populations, a lack of well-accepted endpoints, and inconsistent relationships between changes in motor function and symptomatic outcome. Fundic relaxant drugs are a recent different approach to treatment of gastric motility disorders. Recently studied drugs include drugs under investigation including nitrates, serotonin reuptake blockers, 5-HT(1A) receptor agonists (buspirone and R137696), and muscarinic M1/M2 receptor antagonists (acotiamide or Z-338). .COPYRG. 2008 Elsevier Ltd. All rights reserved.

L7 ANSWER 3 OF 12 EMBASE COPYRIGHT (c) 2009 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2007582821 EMBASE  
TITLE: Emerging drugs for postoperative ileus.  
AUTHOR: Greenwood-Van Meerveld, Beverley, Dr. (correspondence)  
CORPORATE SOURCE: University of Oklahoma Health Science Center, VA Medical Center, Oklahoma Center for Neuroscience, Oklahoma City, OK 73104, United States. Beverley-Greenwood@ouhsc.edu  
AUTHOR: Greenwood-Van Meerveld, Beverley, Dr. (correspondence)  
CORPORATE SOURCE: University of Oklahoma Health Science Center, VA Medical Center, Research Administration, 921 NE 13th Street, Oklahoma City, OK 73104, United States. Beverley-Greenwood@ouhsc.edu  
SOURCE: Expert Opinion on Emerging Drugs, (Nov 2007) Vol. 12, No. 4, pp. 619-626.  
Refs: 73  
ISSN: 1472-8214 CODEN: EOEDA3  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal; General Review; (Review)  
FILE SEGMENT: 037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
006 Internal Medicine  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 27 Dec 2007  
Last Updated on STN: 27 Dec 2007

AB Postoperative ileus (POI) is an impairment of coordinated gastrointestinal (GI) motility that develops as a consequence of abdominal surgery and is a major factor contributing to patient morbidity and prolonged hospitalization. Although the origin and cause of POI are poorly understood, it is known that abnormal GI motility associated with delayed gastric emptying and intestinal transit is a major factor leading to abdominal bloating, vomiting and lack of defecation. Furthermore, opioid drugs such as morphine, used for the management of postoperative pain, cause inhibition of bowel transit. Proposed mechanisms of POI include the stimulation of neuronal responses, such as excitation of afferent neurons and activation of noradrenergic, non-adrenergic and non-cholinergic neuronal pathways, as well as the induction of an intestinal inflammatory response. The development of new pharmacological strategies to prevent or reduce the frequency of POI is very important as existing approaches do not offer relief for most patients. This review describes emerging therapeutics that may advance the care of patients with POI. .COPYRG. 2007 Informa UK Ltd.

L7 ANSWER 4 OF 12 EMBASE COPYRIGHT (c) 2009 Elsevier B.V. All rights reserved on STN DUPLICATE 1

ACCESSION NUMBER: 2007152495 EMBASE  
TITLE: Mitemcinal (GM-611), an orally active motilin agonist, facilitates defecation in rabbits and dogs without causing loose stools.  
AUTHOR: Sudo, H.; Ozaki, K.; Muramatsu, H.; Kamei, K.; Yogo, K.; Cynshi, O.; Koga, H.; Takanashi, H. (correspondence)

CORPORATE SOURCE: Fuji-Gotemba Research Laboratories, Chugai Pharmaceutical Co., Ltd., Gotemba, Shizuoka, Japan. takanashihsn@chugai-pharm.co.jp

AUTHOR: Itoh, Z.

CORPORATE SOURCE: Gunma University, Maebashi, Gunma, Japan.

AUTHOR: Omura, S.

CORPORATE SOURCE: Kitasato Institute, Minato-ku, Tokyo, Japan.

AUTHOR: Takanashi, H. (correspondence)

CORPORATE SOURCE: Targeted Disease Areas Department, Chugai Pharmaceutical Co., Ltd., 1-1 Nihonbashi-Muromachi 2-Chome, Chuo-ku, Tokyo 103-8324, Japan. takanashihsn@chugai-pharm.co.jp

SOURCE: Neurogastroenterology and Motility, (Apr 2007) Vol. 19, No. 4, pp. 318-326.  
 Refs: 40  
 ISSN: 1350-1925 E-ISSN: 1365-2982 CODEN: NMOTEK

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 030 Clinical and Experimental Pharmacology  
 037 Drug Literature Index  
 048 Gastroenterology

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 19 Apr 2007  
 Last Updated on STN: 19 Apr 2007

AB The effects of mitemcinal (GM-611), an orally active motilin agonist, on defecation were investigated in rabbits and dogs. In normal rabbits, within 0-3 h of dosing, orally administered mitemcinal (2.5-10 mg kg(-1)) increased stool weight in a dose-dependent manner without causing loose stools. Sennoside (12-48 mg kg(-1)) also facilitated defecation within 2-9 h of oral administration, but the stools were significantly loosened. In the morphine-induced constipation model, the stool weight of morphine-treated rabbits (1 mg kg(-1)) was only 37.5% of that of untreated animals. Mitemcinal (0.5-20 mg kg(-1)) dose-dependently increased stool weight without increasing stool water content. At the highest dose of mitemcinal, stool weight recovered to 83.9% of that of untreated animals. In normal dogs, mitemcinal (0.3-3 mg kg(-1)) reduced the time to first bowel movement after oral administration without inducing diarrhoea at any dose. These results indicate that mitemcinal facilitates defecation without inducing severe diarrhoea. It is suggested that mitemcinal may be a novel therapeutic agent for constipation that enables easier control of the timing of defecation because of the early onset and short duration of its action, compared with sennoside. .COPYRG. 2007 The Authors.

L7 ANSWER 5 OF 12 EMBASE COPYRIGHT (c) 2009 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2008290814 EMBASE

TITLE: Novel approaches and clinical opportunity for gastrointestinal prokinetic drugs.

AUTHOR: Borman, Richard A.; Sanger, Gareth J. (correspondence)

CORPORATE SOURCE: Immuno Inflammation CEDD, GlaxoSmithKline, Stevenage, Hertfordshire SG1 2NY, United Kingdom. gareth\_j\_sanger@gsk.com

SOURCE: Drug Discovery Today: Therapeutic Strategies, (Sep 2007) Vol. 4, No. 3, pp. 165-170.  
 Refs: 42  
 ISSN: 1740-6773

PUBLISHER IDENT.: S 1740-6773(07)00029-0

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review; (Review)

FILE SEGMENT: 030 Clinical and Experimental Pharmacology



037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
052 Toxicology

LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 2 Jul 2008  
Last Updated on STN: 2 Jul 2008

AB Drugs which increase gastrointestinal (GI) motility are needed by many different patients where transit of intraluminal contents is reduced by disease, drugs or medical procedures. GI prokinetic drug classes include those which enhance gastric emptying (in particular, motilin and ghrelin receptor agonists) and those which increase transit through the intestine (e.g. 5-HT(4) and guanylate cyclase-C receptor agonists, and activators of CLC-2 chloride channels). The potential utility of these new agents is reviewed. .COPYRGT. 2007 Elsevier Ltd. All rights reserved.

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ACCESSION NUMBER: 2007289663 EMBASE  
TITLE: Therapeutic approaches towards the treatment of gastrointestinal disorders.  
AUTHOR: Collingwood, Steve; Witherington, Jason  
SOURCE: Drug News and Perspectives, (Mar 2007) Vol. 20, No. 2, pp. 139-144.  
ISSN: 0214-0934 CODEN: DNPEED  
COUNTRY: Spain  
DOCUMENT TYPE: Journal; Conference Article; (Conference paper)  
FILE SEGMENT: 030 Clinical and Experimental Pharmacology  
037 Drug Literature Index  
048 Gastroenterology  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 9 Jul 2007  
Last Updated on STN: 9 Jul 2007

AB The Society for Medicines Research gathered an international panel of speakers and about 60 delegates for their symposium September 21, 2006, on Therapeutic Approaches Towards the Treatment of Gastrointestinal Disorders, at the National Heart and Lung Institute, in London, U.K. The focus of the conference was to discuss therapeutic strategies taken towards the treatment of inflammatory bowel disease, acid-related disorders and irritable bowel syndrome. Key note lectures addressed the development of tegaserod, a 5-HT(4) receptor agonist, for the treatment of constipation dominant irritable bowel syndrome (cIBS), the use of tumor necrosis factor  $\alpha$  (TNF $\alpha$ ) inhibitors in the treatment of chronic inflammatory diseases, including Crohn's disease, the development of effective inhibitors of gastric acid secretion, the role of  $\alpha(4)\beta(7)$  integrin in the development of Crohn's disease and ulcerative colitis, the parts played by the neuropeptides ghrelin and motilin in the control of gastrointestinal motility, and the role of bacteria in functional gastrointestinal disease. .COPYRGT. 2007 Prous Science. All rights reserved.

L7 ANSWER 7 OF 12 EMBASE COPYRIGHT (c) 2009 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2006605256 EMBASE  
TITLE: An update on autonomic neuropathy affecting the gastrointestinal tract.  
AUTHOR: Horowitz, Michael, Dr. (correspondence)  
CORPORATE SOURCE: Department of Medicine, University of Adelaide, Royal Adelaide Hospital, North Terrace, Adelaide, SA 5000, Australia. michael.horowitz@adelaide.edu.au

AUTHOR: Phillips, Liza K.; Rayner, Christopher K.; Jones, Karen L.  
SOURCE: Current Diabetes Reports, (Dec 2006) Vol. 6, No. 6, pp.  
417-423.  
Refs: 60  
ISSN: 1534-4827 CODEN: CDRUAK  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal; General Review; (Review)  
FILE SEGMENT: 027 Biophysics, Bioengineering and Medical  
Instrumentation  
003 Endocrinology  
030 Clinical and Experimental Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 12 Jan 2007  
Last Updated on STN: 4 May 2007

AB Gastrointestinal symptoms and disordered gut motility occur frequently in the diabetic population and are generally regarded as manifestations of gastrointestinal "autonomic dysfunction," although the relationships between both symptoms and dysmotility with abnormal cardiovascular autonomic function are weak. It is now recognized that the blood glucose concentration is both a determinant of and determined by gastrointestinal function. An improved definition of the underlying pathophysiology should facilitate the development of therapies that are targeted more effectively. Copyright .COPYRGT. 2006 by Current Science Inc.

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ACCESSION NUMBER: 2006354674 EMBASE  
TITLE: Promotility medications - Now and in the future.  
AUTHOR: Karamanolis, G.; Tack, J., Dr. (correspondence)  
CORPORATE SOURCE: Center for Gastroenterological Research, KU Leuven, Leuven, Belgium. Jan.Tack@med.kuleuven.ac.be  
AUTHOR: Tack, J., Dr. (correspondence)  
CORPORATE SOURCE: Department of Internal Medicine, Division of Gastroenterology, University Hospital Gasthuisberg, Herestraat 49, BE-3000 Leuven, Belgium. Jan.Tack@med.kuleuven.ac.be  
SOURCE: Digestive Diseases, (Jul 2006) Vol. 24, No. 3-4, pp. 297-307.  
Refs: 152  
ISSN: 0257-2753 CODEN: DIDIEW  
COUNTRY: Switzerland  
DOCUMENT TYPE: Journal; General Review; (Review)  
FILE SEGMENT: 030 Clinical and Experimental Pharmacology  
036 Health Policy, Economics and Management  
037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 22 Aug 2006  
Last Updated on STN: 22 Aug 2006

AB Gastrointestinal promotility drugs stimulate smooth muscle contractions to enhance gastric emptying and small and large bowel transit. Currently available drug classes with prokinetic properties include antidopaminergic agents, serotonergic agents, and motilin-receptor agonists. Due to moderate prokinetic effects, poor symptomatic responses and the presence of adverse effects, there is a clear need for new classes of prokinetics. Several newer prokinetic drugs and drug classes are currently under

evaluation. Selecting candidate agents and designing the appropriate therapeutic trials is hampered by the lack of insight in the pathophysiology of motility-related symptoms. As gastrointestinal motor disorders are chronic, relapsing, and remitting disorders, it seems desirable that studies with candidate prokinetic drugs establish a long-term efficacy and not only short-term effects on gastrointestinal functions. Copyright .COPYRGT. 2006 S. Karger AG.

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ACCESSION NUMBER: 2006354667 EMBASE  
TITLE: Gastrointestinal motility disorders: An update.  
AUTHOR: Lacy, Brian E., Dr. (correspondence); Weiser, Kirsten  
CORPORATE SOURCE: Division of Gastroenterology and Hepatology,  
Dartmouth-Hitchcock Medical Center, Lebanon, NH, United States. brian.lacy@hitchcock.org  
AUTHOR: Lacy, Brian E., Dr. (correspondence)  
CORPORATE SOURCE: Division of Gastroenterology and Hepatology, Area 4C,  
Dartmouth-Hitchcock Medical Center, 1 Medical Center Drive,  
Lebanon, NH 03756, United States. brian.lacy@hitchcock.org  
SOURCE: Digestive Diseases, (Jul 2006) Vol. 24, No. 3-4, pp. 228-242.  
Refs: 205  
ISSN: 0257-2753 CODEN: DIDIEW  
COUNTRY: Switzerland  
DOCUMENT TYPE: Journal; General Review; (Review)  
FILE SEGMENT: 011 Otorhinolaryngology  
030 Clinical and Experimental Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 22 Aug 2006  
Last Updated on STN: 22 Aug 2006

AB Gastrointestinal motility disorders encompass a wide array of signs and symptoms that can occur anywhere throughout the luminal gastrointestinal tract. Motility disorders are often chronic in nature and dramatically affect patients' quality of life. These prevalent disorders cause a tremendous impact both to the individual patient and to society as a whole. Significant progress has been made over the last 5 years in understanding the etiology and pathophysiology of gastrointestinal motility disorders. This clinical update will focus on seven of the most common gastrointestinal motility disorders (achalasia, non-achalasia esophageal motility disorders, dyspepsia, gastroparesis, chronic intestinal pseudo-obstruction, irritable bowel syndrome, and chronic constipation) with an emphasis on current treatment options and new therapeutic modalities. Copyright .COPYRGT. 2006 S. Karger AG.

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ACCESSION NUMBER: 2006221644 EMBASE  
TITLE: The IBS market.  
AUTHOR: Ashburn, Ted T., Dr. (correspondence); Gupta, Meera S.  
CORPORATE SOURCE: Dynogen Pharmaceuticals Inc., 52 Second Avenue, Waltham, MA 02451, United States. tashburn@dynogen.com  
SOURCE: Nature Reviews Drug Discovery, (Feb 2006) Vol. 5, No. 2, pp. 99-100.  
Refs: 4  
ISSN: 1474-1776 E-ISSN: 1474-1784 CODEN: NRDDAG  
PUBLISHER IDENT.: N1961  
COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; Article  
FILE SEGMENT: 017 Public Health, Social Medicine and Epidemiology  
030 Clinical and Experimental Pharmacology  
036 Health Policy, Economics and Management  
037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
LANGUAGE: English  
ENTRY DATE: Entered STN: 5 Jun 2006  
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ACCESSION NUMBER: 2005369856 EMBASE  
TITLE: Annual update 2004/2005 - Treatment of gastrointestinal disorders.  
AUTHOR: Prous, J.R.  
SOURCE: Drugs of the Future, (Jun 2005) Vol. 30, No. 6, pp. 581-588.  
ISSN: 0377-8282 CODEN: DRFUD4  
COUNTRY: Spain  
DOCUMENT TYPE: Journal; General Review; (Review)  
FILE SEGMENT: 037 Drug Literature Index  
048 Gastroenterology  
LANGUAGE: English  
ENTRY DATE: Entered STN: 29 Sep 2005  
Last Updated on STN: 29 Sep 2005

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ACCESSION NUMBER: 2005294462 EMBASE  
TITLE: Digestive disease week 2005. Drug highlights II. 15-18 May 2005, Chicago, IL, USA.  
AUTHOR: De La Rue, Sarah A. (correspondence)  
CORPORATE SOURCE: University of Virginia, PO Box 800708, Charlottesville, VA 22908, United States. sarahdlr@virginia.edu.; sarahdlr@virginia.edu  
SOURCE: IDrugs, (Jul 2005) Vol. 8, No. 7, pp. 539-541.  
ISSN: 1369-7056 CODEN: IDRUFN  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal; Article  
FILE SEGMENT: 003 Endocrinology  
030 Clinical and Experimental Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
048 Gastroenterology  
006 Internal Medicine  
LANGUAGE: English  
ENTRY DATE: Entered STN: 21 Jul 2005  
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(FILE 'HOME' ENTERED AT 15:01:37 ON 29 JUL 2009)

FILE 'REGISTRY' ENTERED AT 15:01:48 ON 29 JUL 2009

L1 1 S MITEMCINAL/CN

FILE 'CAPLUS' ENTERED AT 15:02:08 ON 29 JUL 2009

L2 22 S L1

L3 1 S L2 AND (CONSTIPATION OR DYSCHIZIA)

FILE 'EMBASE, BIOSIS, MEDLINE' ENTERED AT 15:03:14 ON 29 JUL 2009

FILE 'REGISTRY' ENTERED AT 15:03:20 ON 29 JUL 2009

SET SMARTSELECT ON

L4 SEL L1 1- CHEM : 2 TERMS  
SET SMARTSELECT OFF

FILE 'EMBASE, BIOSIS, MEDLINE' ENTERED AT 15:03:21 ON 29 JUL 2009

L5 114 S L4  
L6 13 S L5 AND (CONSTIPATION OR DYSCHIZIA)  
L7 12 DUP REM L6 (1 DUPLICATE REMOVED)

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---Logging off of STN---

=>

Executing the logoff script...

=> LOG Y

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	53.01	86.13

STN INTERNATIONAL LOGOFF AT 15:04:37 ON 29 JUL 2009